



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2345

<b>SERIAL NUMBER</b> 10/765,836	<b>FILING OR 371(c) DATE</b> 01/29/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> 520.43433X00	
<b>APPLICANTS</b> Ako Shose, Tokyo, JAPAN; Kazutoshi Kan, Chiyoda, JAPAN; Yasuyuki Momoi, Ushiku, JAPAN;					
<b>** CONTINUING DATA *****</b> <i>None</i>					
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2003-048708 02/26/2003					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/12/2004</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>Ikke</i> Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 20457					
<b>TITLE</b> Surgical operation assistance system and surgical operation assisting method					
<b>FILING FEE RECEIVED</b> 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		